

RETURNING VENDOR APPLICATION

(To be completed by market management)

Status: _____

Area: _____

Date: _____

State Farmers Market

1201 Agriculture Street

Raleigh, NC 27603

919-733-7417

Received by: _____

Date: _____

***Please complete and return to the market office prior to occupying your space. This application expires on December 31st of each calendar year.**

**As part of the approval process you must resubmit an application each year by February 15th.
Incomplete applications will not be accepted.**

Business or Farm Name: _____

Contact Name: _____

Business or Farm Mailing

Address: _____ **City** _____ **State** _____ **Zip** _____

Street address/PO Box

County: _____

Business or Farm Physical

Address: _____ **City** _____ **State** _____ **Zip** _____

Street address/PO Box

County: _____

Home Address _____ **City** _____ **State** _____ **Zip** _____

Street address/PO Box

County: _____

Telephone Numbers

(PLEASE CIRCLE OR HIGHLIGHT THE PHONE NUMBERS THAT ARE OK TO GIVE OUT TO CUSTOMERS)
(OTHER NUMBERS WILL ONLY BE USED BY MARKET STAFF IN THE EVENT OF AN EMERGENCY)

Business or Farm: _____ **Home:** _____

Contact Name(s) & Cell Phone Number(s): _____

Fax # _____ **Email address** _____

Website address _____

Social Media Sites _____

Emergency Contact: _____

Name

Home #

Cell #

Emergency Contact: _____

Name

Home #

Cell #

Please circle the area that your space is in: _____ **# of Spaces** _____

Market Shoppes

Farmers Area

Craft Shed

Truckers Shed

Months of operation: _____

Please list all items that you produce along with any other items that you plan to sell. Use additional pages if necessary. Please refer to the Vendor Checklist for all items that are required prior to approval to sell at The State Farmers Market.

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Do you prefer to: (indicate by check mark)

____ Wholesale Only--Sell only in unbroken containers (excluding melons)

☐ Wholesale and Retail ☐ Retail Only

I have read the 2014 State Farmers Market Guidelines and agree to abide by all rules, regulations, and policies of the North Carolina Department of Agriculture and the State Farmers Market.

I further understand that my failure to abide by these guidelines, rules, and regulations, and policies as interpreted by the Market Manager may result in temporary or permanent dismissal from the Market.

Print Full Name _____

Seller's Signature _____

Date: _____